

**EDUCATION OF PUPILS AT SCHOOL WITH  
MEDICAL CONDITIONS AND THE  
ADMINISTRATION OF MEDICATION**



**Name of Owner:** Naomi Fan & Rebekka Bojanowski

**Date:** February 2026

**Date of next review:** February 2027

**Approved by Governors:** 25 March 2026

This policy is shared and signed by all the staff at Southgate School and shared on the school's website for all parents and carers to view. If you have any questions in relation to this policy, please email [office@southgateschool.co.uk](mailto:office@southgateschool.co.uk)

We have carefully considered and analysed the impact of this policy on equality and the possible implications for pupils or staff with protected characteristics, as part of our commitment to meet the Public Sector Equality Duty (PSED) requirement to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations.

## 1. Introduction

1.1. This policy is written in line with the requirements of:

- Children and Families Act 2014 – Section 100.
- Supporting Pupils at School with Medical Conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England, Department for Education (DfE) December 2015.
- Special Educational Needs and Disability (SEND) Code of Practice, DfE January 2015.
- Mental Health and Behaviour in Schools: Departmental Advice for School Staff, DfE November 2018.
- Equalities Act 2010
- School Admissions Code, DfE December 2014
- Kirklees Council Policy on Supporting Pupils at School with Medical Conditions.

This policy should be read in conjunction with the following school policies; Safeguarding Policy, Off-Site Visits Policy and Complaints Procedures.

This policy was consulted with pupils with medical conditions, parents/carers of pupils with medical conditions, representatives from the governing body, healthcare professionals and it will be reviewed annually.

## 2. Definitions of Medical Conditions

2.1. Pupils' medical needs may be broadly summarised as being of two types:

- **Short-term:** affecting their participation at school because they are on a course of medication.
- **Long-term:** potentially limiting access to education and requiring on-going support, medicines or care while at school to help them to manage their condition and keep them well, monitoring and intervention in emergency circumstances. It is important that parents/carers feel confident that the school

will provide effective support for their child's medical condition and that pupil's feel safe. (Further information on specific medical conditions, including Asthma, Diabetes, Allergies and Epilepsy, is available in the Kirklees Council Policy on Supporting Pupils at School with Medical Conditions)

Some pupils with medical conditions may be considered disabled under the definition set out in the Equalities Act 2010. Where this is the case the Governing Body complies with their duties under that Act. Some may also have special educational needs (SEN) and all pupils at Southgate School have an Education, Health and Care (EHC) Plan which brings together health and social care needs, as well as their special educational provision. For pupils with SEND, this policy should be read in conjunction with the SEND Code of Practice which explains the duties of the Local Authority, health bodies and the school to provide for those with SEN. For pupils who have medical conditions that require EHC Plans, compliance with the SEND Code of Practice ensures compliance with this policy in respect to those pupils.

### **3. The Role of the Governing Body**

3.1. The Governing Body remains legally responsible and accountable for fulfilling their statutory duty for supporting pupils at school with medical conditions. The Governing Body of Southgate School fulfil this by:

- Ensuring that arrangements are in place to support pupils with medical conditions. In doing so we will ensure that such children can access and enjoy the same opportunities at school as any other child.
- Taking into account that many medical conditions that require support at school, will affect quality of life and may be life-threatening. Some will be more obvious than others and therefore the focus is on the needs of each individual child and how their medical condition impacts on their school life.
- Ensuring that the arrangements give parents/carers and pupils confidence in the school's ability to provide effective support for medical conditions, should show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. We will ensure that staff are properly trained to provide the support that pupils need.
- Ensuring that the arrangements put in place are sufficient to meet our statutory duties and ensure that policies, plans, procedures and systems are properly and effectively implemented.
- Developing a policy for supporting pupils with medical conditions that is reviewed regularly and accessible to parents/carers and school staff (this policy).
- Ensuring that the policy includes details on how it will be implemented effectively, including a named person who has overall responsibility for policy implementation (see section below on policy implementation).
- Ensuring that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition (see section below on procedure to be followed when notification is received that a pupil has a medical condition).
- Ensuring that the policy covers the role of Medical professional Healthcare Plans and school created Medical Needs Plans.

- Ensuring that the policy clearly identifies the roles and responsibilities of all those involved in arrangements for supporting pupils at school with medical conditions and how they will be supported, how their training needs will be assessed and how and by whom training will be commissioned and provided (see section below on staff training and support).
- Ensuring that the policy covers arrangements for children who are competent to manage their own health needs and medicines (see section below on the child's role in managing their own medical needs).
- Ensuring that the policy is clear about the procedures to be followed for managing medicines including the completion of written records (see section below on managing medicines on school premises).
- Ensuring that the policy sets out what should happen in an emergency situation (see section below on emergency procedures).
- Ensuring that the arrangements are clear and unambiguous about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so (see section below on day trips, residential trips and sporting activities).
- Ensuring that the policy is explicit about what practice is not acceptable (see section on unacceptable practice).
- Ensuring that the correct level of insurance is in place and appropriate to the level of risk (see section below on liability and indemnity).
- Ensuring that the policy sets out how complaints may be made and will be handled concerning the support of pupils with medical conditions (see section below on complaints).

#### **4. Policy Implementation**

4.1. The statutory duty for managing arrangements for supporting pupils at school with medical conditions rests with the Governing Body. The Governing Body have delegated the implementation of this policy to the staff below, however, the Governing Body remains legally responsible and accountable for fulfilling our statutory duty.

4.2. The overall responsibility for the implementation of this policy is given to the Head Teacher.

4.3. Senior Leaders or delegated staff member will be responsible for approving risk assessments for offsite visits and other school activities outside of the normal timetable. In addition to this they are responsible for the monitoring of Medical professional Healthcare Plans and school created Medical Needs Plans, ensuring all staff (including supply) have understood and signed the relevant documentation. They will also be responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in cases of staff absences or staff turnover to ensure that someone is always available and on-site with an appropriate level of training

4.4. The Assistant Head and Pastoral and Intervention Managers, or a member of staff with pastoral responsibilities, will be responsible in conjunction with parents/carers, for drawing up, implementing and keeping under review the Medical Needs Plan for each pupil and making sure relevant staff are aware of these plans.

4.5. All members of staff are expected to show commitment and awareness of children's medical conditions and the expectations of this policy. All new members of staff will be inducted into the arrangements and guidelines in this policy upon taking up their post.

## **5. Procedure to be Followed when Notification is Received that a Pupil has a Medical Condition**

5.1. This covers notification prior to admission, procedures to cover transitional arrangements between schools or alternative providers, and the process to be followed upon reintegration after a period of absence or when pupils' needs change. For children being admitted to Southgate School for the first time with good notification given, the arrangements will be in place for the start of the relevant school term. In other cases, such as a new diagnosis or a child moving to Southgate School mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.

5.2. In making the arrangements, we will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. We also acknowledge that some may be more obvious than others. We will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. We aim to ensure parents/carers and pupils have the confidence in our ability to provide effective support for medical conditions in school, so that arrangements will show an understanding of how medical conditions impact on the child's ability to learn, as well as increase their confidence and promote self-care.

5.3. We will ensure that staff are properly trained and supervised to support pupil's medical conditions and will be clear about the need to actively support pupils with medical conditions to participate in off-site visits, or in sporting activities, and not prevent them doing so. We will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician, such as a GP, states that this is not possible. We will make sure that no child with a medical condition is denied admission or prevented from attending the school because arrangements for supporting their medical condition have not been made. However, in line with our safeguarding duties, we will ensure that all pupils' health is not put at unnecessary risk, for example, from infectious disease. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

5.4. Southgate School does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure the right support can be put in place, these discussions will be led by the Assistant Head or Pastoral and Intervention Managers, and then a Medical Needs Plan will be written in conjunction with the parents/carers by Pastoral and Intervention Managers, and put in place.

5.5. We will work with the Local Authority to help them follow statutory guidance for ensuring a good education for children who cannot attend school because of health needs.

## **6. Medical Needs Plans (Formally Individual Healthcare Plans)**

6.1. Medical Needs Plans will help ensure that we effectively support pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom (parents/carers will be encouraged to administer medication, undertake any medical procedures outside of the school day where this is possible). They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in the majority of other cases too, especially where medical conditions are long-term and complex. However, not all pupils will require one. The school, healthcare professional and parent/carer should agree, based on evidence, when a Medical Needs Plan would be inappropriate or disproportionate. If consensus cannot be reached the Head Teacher is best placed to take a final view.

***Attached as Appendix 1 is the process the school follows for developing Medical Needs Plans.***

6.2. Medical Needs Plans will be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the pupil effectively. The level of detail within the plan will depend on the complexity of the pupil's condition and the degree of support needed. This is important because different pupils with the same health condition may require very different support.

6.3. Medical Needs Plans (and their review) should be drawn up in partnership between the school, parents/carers and a relevant healthcare professional e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the pupil. We use a model letter inviting parents/carers to contribute to the individual healthcare plan development. Pupils should also be involved whenever appropriate. The aim should be to capture the steps which Southgate School should take to help manage their condition and overcome any potential barriers to getting the most from their education. Partners should agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the school.

6.4. We will ensure that Medical Needs Plans are reviewed at least annually or earlier if evidence is presented that the pupil's needs have changed. They will be developed and reviewed with the pupil's best interests in mind and will ensure that we assess and manage the risks to the pupil's education, health and social wellbeing, and minimise disruption. Where a pupil is returning to school following a period of hospital education or alternative provision, we will work with the local authority and education provider to ensure that the Medical Needs Plan identifies the support the pupil will need to reintegrate effectively.

6.5. Where home to school transport is being provided by Kirklees Council, we will support the development of any risk assessments and share the medical needs plans with the local authority and driver/Passenger Assistant. Where pupils have a life-threatening condition or a medical need that requires an emergency response, Medical Needs plans (along with any medical professional healthcare plan) should be carried on the vehicle detailing the procedure to be followed in the event of an emergency, the responsibility for this lies with School Transport.

6.6. Medical needs plans will suit the specific needs of each pupil, but will include all of the following information:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage the condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons.
- Specific support for the pupil's educational, social and emotional needs e.g. how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions.
- The level of support needed (some pupils will be able to take responsibility for their own health needs) including in emergencies. If a pupil is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring.

- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional; and cover arrangements for when they are unavailable.
- Who in the school needs to be aware of the pupil's condition and the support required.
- Arrangements for written permission from parents/carers and the staff member with designated responsibility for medication to be administered by a member of staff, or self-administered by the pupil during school hours.
- Separate arrangements or procedures required for off-site visits or other school activities outside of the normal school timetable that will ensure the pupil can participate e.g. risk assessments.
- Where confidentiality issues are raised by the parent/carer/pupil, the designated individual is to be entrusted with information about the pupil's condition.
- What to do in an emergency including whom to contact, and contingency arrangements. Some pupils may have an emergency healthcare plan-(identified as Medical professional healthcare plan in this document)-prepared by their lead clinician that could be used to inform development of their medical needs plan.
- Copies of specific healthcare/action plans produced by professional (e.g. allergy action plan, diabetes healthcare plan, etc.)

## 7. Roles and Responsibilities

7.1. Please refer to the section on policy implementation for the functions document that have been delegated to different members of staff at Southgate School.

7.2. In addition, we can refer to the Commissioned School Nurse, with parent/carer consent, for support with drawing up medical needs plans, provide or commission specialist medical training, liaise with lead clinicians for advice or support in relation to pupils with medical conditions.

7.3. Parents and other **healthcare professionals, including GPs and paediatricians** should notify the school when a child has been identified as having a medical condition that will require support at school. Specialist local health teams may be able to provide support, and training to staff, for children with particular conditions (e.g. asthma, diabetes, epilepsy, etc.).

7.4. **Pupils** with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their medical needs plan.

7.5. **Parents/carers** should provide the school with sufficient and up-to date information about their child's medical needs. They may, in some cases, be the first to notify the school that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child's medical needs plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

7.6. **Kirklees Council** will work with us to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education in a mainstream school because of their health needs, the local authority has a duty to make other arrangements.

7.7. **Providers of health services** co-operate with the school as it supports children with medical conditions. They provide valuable support, information, advice and guidance to the school, and their staff, to support children with medical conditions at school.

7.8. The **Ofsted** common inspection framework came into effect in 2025. Inspectors must consider how well a school meets the needs of the full range of pupils, including those with medical conditions. Schools are expected to have a policy dealing with medical needs and to be able to demonstrate that it is being implemented effectively.

## **8. Staff Support and Training**

8.1. Whole school awareness training will be arranged annually so that staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing that policy.

- Some staff receive training for administering specific or specialist medicines e.g. auto-adrenaline injectors, insulin or Midazolam. There are notices in the Medical Room and relevant classrooms to show which staff are trained. These usually include first aiders and then staff based in the classroom with the pupil.

8.2. We record staff training for the administration of medicines and/or clinical procedures centrally to monitor coverage and dates for refresher training. This is the responsibility of the Assistant Head and Pastoral and Intervention Managers.

8.3. All Staff who provide support to pupils for medical conditions will be trained by a qualified healthcare professional qualified when required. The training need will be identified by the healthcare professional/parent/carer during the development or review of the medical needs plan. We may arrange training ourselves and will ensure it remains up-to-date.

8.4. Training should be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements set out in the medical needs plan. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

8.5. For the protection of both staff and pupils, a second member of staff will be present while medication is being administered or more intimate procedures are being followed.

8.6. Staff must not give prescription medicines or undertake healthcare procedures without appropriate medical induction or specific training for some conditions (updated to reflect any medical healthcare plans/medical needs plans). A first aid certificate does not constitute appropriate training in supporting children with specific medical conditions. Healthcare professionals, can provide confirmation of proficiency of staff in a specific medical procedure, or in providing specific medication.

8.7. All staff will receive induction training and regular whole school awareness training so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing the policy. The Assistant Head or Pastoral and Intervention Manager will seek advice from relevant healthcare professionals about training needs, including preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

8.8. The family of a pupil will often be essential in providing relevant information to school staff about how their child's needs can be met, and parents/carers will be asked for their views. They should provide specific advice, but should not be the sole trainer.

## **9. The Child's Role in Managing their own Medical Needs**

9.1. If, after discussion with the parent/carer, it is agreed that the pupil is competent to manage their own medication and procedures, they will be encouraged to do so. This will be reflected in the medical needs plan.

9.2. Wherever possible pupils will be allowed to carry their own medicines and relevant devices or should be able to access their medication for self-medication quickly and easily; these will be stored in the cupboard in Medical Room to ensure that the safeguarding of other pupils is not compromised. Southgate School also recognises that pupils who take their own medicines themselves and/or manage their medical conditions may require an appropriate level of supervision. If it is not appropriate for a pupil to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

9.3. If a pupil refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the medical needs plan. Parents/carers will be informed so that alternative options can be considered.

## 10. Managing Medicines on School Premises and Record Keeping

10.1. At Southgate School the following procedures are to be followed:

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so;
- No child under 16 should be given prescription or non-prescription medicines without their parents/carers written consent—except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents/carers. In such cases, every effort should be made to encourage the child or young person to involve their parents/carers while respecting their right to confidentiality;
- Non-prescription medicines
  - With parental/carer written consent we will administer non-prescription medicines. Medication e.g. for pain relief, should never be administered without first checking maximum dosage and when previous doses were taken. Parents/carers will be informed via Smartlog.
  - Medicines must be provided in the original packaging, with clear directions and written records must be kept in line with the school policy.
  - The school will obtain confirmation from the parent/carer that the child has used this medication before and did not suffer any allergic or other adverse reaction.
  - **Please note:** the DfE's statutory guidance Supporting Pupils at School with Medical Conditions states a child under 16 should never be given medicine containing aspirin unless prescribed by a doctor.

The school will not administer medicines containing Ibuprofen (e.g. Nurofen) without a prescription, due to the reported risk of triggering an asthma attack.

The school keeps paracetamol in tablet and liquid form in stock for emergencies. This is only to be administered to pupils if the above guidance is followed.

- Prescription medicines
  - Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours;
  - We will only accept prescribed medicines, with written permission from parent/carer that are in-date, labelled, provided in the original container (as dispensed by a pharmacist) and include instructions for administration, dosage and storage. The exception to this is insulin which must be in-date, but will generally be available to the school inside an insulin pen or a pump, rather than its original container;
  - We have systems in place to check that medication held in school is in line with the pupil's medical professional healthcare plan/ medical needs plan and is within date.
  - It is recommended that a primary aged pupil should never carry medicine to and from school. For older pupils at Southgate School, careful consideration will need to be given to whether a pupil is developmentally able to take responsibility for medicine or not. Medicine must be handed to the Assistant Head, Pastoral & Intervention Manager or a member of staff with pastoral responsibilities as soon as the pupil arrives at school.
  - All medicines will be stored safely in the [Medical Room](#). All non-emergency medication will be kept in a locked cabinet used only for that purpose. Some medicines need to be refrigerated. These will be kept in the fridge in the medical room, which is only to be used for medicine and has limited access.
  - Pupils will know where their medicines are at all times and be able to access them immediately. Where relevant, they will know who holds the key to the storage facility, and how to request this.
  - Medicines and devices, such as asthma inhalers, blood glucose meters, hypo treatment and adrenaline pens, should be always be readily available. Medication that is required to be kept in class will be kept in a clearly marked, locked cupboard in the pupil's classroom and classroom staff will have keys to access this. All medication should be marked with the child's name and expiry date.

- A pupil who had been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another pupil for use is an offence. Monitoring arrangements may be necessary.
- We will keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container in the Medical Room. Only named staff will have access.
- The name of the person(s) responsible for the cabinet or administering medication should be stated on the cabinet.
- Controlled drugs should be easily accessible in an emergency. In cases of emergency the key must be readily available to all members of staff to ensure access. In these circumstances, controlled drugs will be signed out by approved and trained staff each day. It will be securely stored in a clearly marked, locked cupboard in the pupil's classroom and trained classroom staff will have keys to access this in case of an emergency. Portable bags, such as green medication bumbags, are used by approved and trained staff to carry medication in if a pupil is out of their classroom e.g. playtime, sensory room, educational visit.
- A record is kept of any doses used and the amount of the controlled drug held in the school.
- Staff administering medicines should do so in accordance with the prescriber's instructions. Southgate School will keep a record of all medicines administered to individual pupils, stating what, how and how much was administered, when and by whom including the name of a witness. Any side effects of the medication to be administered at school should be noted. Written records are kept of all medicines administered to pupils. Those records offer protection to staff and pupils and provide evidence that agreed procedures have been followed;
- Only one member of staff (working with a pupil) at any one time should administer medicines (to avoid the risk of double dosing). This individual will ensure there is a second member of staff to witness the administration of medication.

Arrangements should be made to relieve this member of staff from other duties while preparing or administering doses (to avoid the risk of interruption before the procedure is completed). If more than one person administers medicines a system will be arranged to avoid the risk of double dosing, e.g. a rota, routine consultation of the individual pupil's medicine record before any doses are given, etc.

- When no longer required, medicines are returned to parents/carers to arrange safe disposal. Sharp boxes should always be used for the disposal of needles and other sharps.
- The Governing Body have decided to hold stocks on site of asthma (salbutamol) inhalers and Adrenaline auto-injector devices for emergency use. These will be kept in the Medical room and regularly checked as part of the termly medical audit to ensure they are in date.

## **11. Emergency Procedures**

11.1. The Head Teacher will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place, including school trips within and outside the UK, as part of the general risk management process.

11.2. Where a pupil has an Medical Professional Healthcare Plan or Medical Needs Plan, this will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

11.3. If a pupil needs to be taken to hospital, staff will stay with them until a parent/carer arrives, or accompany the child taken to hospital by ambulance or accompany the child to hospital if there is no parent or carer present (see **Appendix 2**). The school is aware of the local emergency services cover arrangements and the correct information will be provided for navigation systems.

## **12. Off-site Visits and Sporting Activities**

12.1. We will actively support pupils with medical conditions to participate in off-site visits and sporting activities by being flexible and making reasonable adjustments unless there is evidence from a clinician, such as a GP, that this is not possible.

12.2. We will always conduct a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions can be included safely. The Medical Needs plan will be updated with specific information required for the visit/activity and a copy will be taken on the visit. All staff supervising off-site visits will be made aware of any medical needs and relevant emergency procedures. This will involve consultation with parents/carers and relevant healthcare professionals and will be informed by our Off-Site Visits Policy.

12.3. Staff with the role of administering medicines must have the relevant and current training to do so. A first aid qualification does not cover the skills and knowledge for the administration of medicines.

### **13. Work Experience**

13.1. The school will assess the suitability of work experience placements, with support from C&K Careers. The risk assessment will include the activities being undertaken, travel to and from the placement, supervision during non-teaching time or breaks and lunch hours. This will not conflict with the responsibility of the employer to undertake a risk assessment to identify the significant risks and necessary control measures when pupils below the minimum school leaving age are on site.

## **14. Hygiene and Infection Control**

14.1. All staff will be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Staff will have access to protective disposable vinyl gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment. Further information is contained in the First Aid Policy and Guidance for Schools on First Aid.

## **15. Equipment**

15.1. Some pupils will require specialist equipment to support them whilst attending school. Staff will check the equipment, in line with any training given, and report concerns to Assistant Head or Pastoral and Intervention Manager.

15.2. The maintenance contract/safety checks for all equipment and the procedure to be followed in the event of equipment failure will be detailed within the Medical Professional Healthcare Plan and/or Medical needs plan.

15.3. Staff will be made aware of the use, storage and maintenance of any equipment.

15.4. The School has a defibrillator for emergency use in school. It is located in the Medical Room. It is checked regularly as part of the termly medicine audit.

## **16. Unacceptable Practice**

16.1. Although staff at Southgate School should use their discretion and judge each case on its merits with reference to the pupil's Medical professional healthcare plan and/or medical needs plan, it is not generally acceptable practice to:

- Prevent pupils from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every pupil with the same condition requires the same treatment.
- Ignore the views of the pupil or their parents/carers; or ignore medical evidence or opinion (although this may be challenged).
- Send pupils with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans.
- Send a pupil who becomes ill to the school office or medical room unaccompanied, or with someone unsuitable.
- Penalise pupils for their attendance record if their absences are related to their medical condition e.g. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively.
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues.

## **17. Liability and Indemnity**

17.1. Individual cover may need to be arranged for any healthcare procedures, in particular those which would be considered invasive or normally undertaken by a medical professional. If in any doubt please contact the Insurance and Risk Management Team who will check with external insurers. Any requirements of the insurance, such as the need for staff to be trained, should be made clear in the healthcare plan and complied with. In the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer rather than the employee.

17.2. Staff who assist with administering medication to a child in accordance with the procedure detailed within this policy are explicitly reassured that they will be acting within the scope of their employment and that they will be indemnified. Indemnity requires that these procedures are followed as described here. The indemnity though will not be given in cases of fraud, dishonesty, or criminal offence. In the unlikely event of any civil action for damages being taken against you, please contact the Insurance and Risk Management Team. Any member of staff will be fully supported throughout the process should an allegation be made.

## **18. Complaints**

18.1. Should parents/carers be dissatisfied with the support provided, they must discuss their concerns directly with the school. This will be with the child's teacher in the first instance, with whom any issues should be addressed. If this does not resolve the problem or allay the concern, the problem should be brought to a member of the school leadership team, who will, where necessary, bring concerns to the attention of the Head Teacher. In the unlikely event of this not resolving the issue, the parents/carers would be advised to make a formal complaint using the Southgate School Complaints Procedure.

## Appendix 1: Process for Developing Individual Healthcare Plans

Parent/carer or healthcare professional informs the school that the child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed.

Head Teacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies the member(s) of school staff who will provide support to the child.

Meeting to discuss and agree on need for the Medical Needs Plan to include key school staff, child, parent/carer, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them) \*.

Develop medical needs plans in partnership – agree who leads on writing it. Input from healthcare professional must be provided.

School staff training needs identifying.

Healthcare professional commissions/delivers training and staff signed off as competent – Review date agreed.

Medical needs plan implemented and circulated to all relevant staff.

Medical needs plan reviewed annually or when condition changes. Parent/carer or healthcare professional to initiate.

\*This includes key stakeholders, for example if Home to School Transport (Passenger Travel Team) is required then the school need to consult with this team.

## Appendix 2: Contacting Emergency Services

**Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.**

**Speak clearly and slowly and be ready to repeat information if asked.**

1. Your telephone number - **01484 504544**
2. Your **name**
3. Your location as follows **Southgate School, Southfield Road, Almondbury, HD5 8TG/**  
**Current location while offsite**
4. State what the postcode is - **HD5 8TG**  
What3words for Southgate School - **rank.deflection.closes**
5. Provide the exact location of the patient within the school setting
6. Provide the name of the child, date of birth/age and a brief description of their symptoms
7. Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient – **Visitors Carpark**
8. Put a completed copy of this form by the phone
9. Share any appropriate documents linking to child's medical needs with any paramedics/emergency services in attendance